

SUPERIOR COURT OF THE STATE OF DELAWARE
AFFIDAVIT AND PETITION FOR RENEWAL OF LICENSE
TO CARRY A CONCEALED DEADLY WEAPON

(Please file original and one (1) copy of all documents between January 1 and June 1, together with \$34.50 filing fee.
Also attach two (2) current 1 ½ x 1 ½ color passport-style photographs.)

(1) Current License# _____ Restricted _____ Unrestricted _____

(2) Applicant's Name _____ Telephone No. _____

(3) Date of Birth: _____ Place of Birth: _____

(4) Citizenship: _____ Occupation: _____

(5) Employer: _____

(6) Have you been denied a permit? _____

(7) Have you been convicted of any alcohol related offense during the last 3 years?

(Give full details) _____

(8) Have you ever been convicted in this State or elsewhere of a felony or a crime of violence involving physical injury to another, whether or not armed with or having in your possession any weapon during the commission of such felony or crime of violence? _____ Yes _____ No

(9) Have you ever been committed for a mental disorder to any hospital, mental institution, or sanitarium? _____ Yes _____ No If yes, do you possess a certificate of a medical doctor or psychiatrist licensed in this State that you no longer suffer from a mental disorder which interferes or handicaps you from handling deadly weapons? _____ Yes _____ No (If yes, attach a copy of the certificate.)

(10) Have you ever been convicted for the unlawful use, possession, or sale of a narcotic, dangerous drug, or central nervous system depressant or stimulant? _____ Yes _____ No

(11) Have you ever been, as a juvenile, adjudicated as delinquent for conduct which, if committed by an adult, would constitute a felony? _____ Yes _____ No

(A response to this question is not required if you have reached your 25th birthday.)

(12) Do you hold a permit in any other State? _____

If yes, which State? _____.

TO THE JUDGE OF THE SUPERIOR COURT OF THE

STATE OF DELAWARE IN AND FOR _____ COUNTY:

The undersigned Petitioner, who resides at _____
_____ in _____ County, holds a valid Delaware permit to carry a concealed
deadly weapon and desires to renew because carrying said weapon is necessary for the protection of petitioner's person
or property or both.

Petitioner swears that the answers to the above questions are true and correct. Petitioner therefore requests that
petitioner's application be approved and a license be issued for the period of three (3) years
beginning_____.

Date

Signature of Petitioner

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ A.D. _____

Notary Public

FOR OFFICIAL USE ONLY

Reviewer Recommendation

Superior Court

Approved_____ Denied_____
Unrestricted_____ Restricted_____
Remarks_____

Approved_____ Denied_____
Unrestricted_____ Restricted_____
Remarks_____

By_____

By_____

Judge